Ventilator associated pneumonia protocols research paper sample

Business, Management



It has been found that "compliance with evidence based practice in the form of a care bundle can reduce the incidence of VAP" (Ellis et al.) or ventilator associated pneumonia.

One example of a protocol is that which was developed by the Institute for Clinical Systems Improvement or ICSI (Weinert). This protocol covers the "orders around patient care management for the prevention of" (Weinert) VAP.

Protocols are associated with bundles, which the Institute for Healthcare Improvement or IHI defines as "a grouping of best practices that, when used individually, are found to be effective" (Wip and Napolitano). Both the IHI and the ICSI agree on the following Ventilator Bundle components for VAP prevention: deep venous thrombosis (DVT) prophylaxis; peptic ulcer disease prophylaxis; daily assessment of readiness to extubate and daily sedation vacation; and elevation of the head to 30 up to 45 degrees.

The care bundle used in the study conducted by Ellis et al. consisted of the following components: heat and moisture exchange filter; endotracheal tube with subglottic drainage; elevation of the bed to more than 30 degrees; prescription of Chlorhexidine mouthwash; a documented weaning plan; and a stoppage of sedation and an evaluation of the patient. This is similar to the guidelines created by the U. S. Army Institute of Surgical Research for the prevention of VAP. The general measures they have established include minimizing the duration of ventilation and performing daily assessments to assess the patient's readiness to extubate; awakening of sedated patients on a daily basis to assess their readiness for extubation; and the conduct of

active surveillance for the occurrence of VAP. Aside from these, the guidelines created by the U. S. Army Institute of Surgical Research also included measures for staff education; respiratory equipment management; prevention of person-to-person bacteria transmission; prevention of aspiration; prevention of Aspiration Related Infection; prevention of gastric colonization; prevention of postoperative pneumonia; and antibiotic therapy.

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